OIPE		<u>a</u> >	_		ı	#	K Re	hara	inl
MAR 1 1 2003 W		App	tion Num	ber	09/492,	315	×	ES ALH	orke
TIAN 1 1 2000 BJ		Filing I	Date		January	27,	2000	Alt	143
REQUEST FOR	WITHDRAWAL		amed Inv	entor			OWN et a	1. 6	9/4
AS ATTORNEY	OR AGENT	Group A	rt Unit		2871			10	M_{\odot}
		Examiner Name		-	K. Parker				»\
		Attorney Docket Number			2119-0121P O DM				
To: Assistant Commi Washington, DC	ssioner for Pater 20231	nts					OX	1	
I hereby apply to wit application.	chdraw as attorne	y or agent	t for th	e above-	identifi	ed pa	tent	:	
The reasons for this	request are:								
The law firm of Birch requesting withdrawal services rendered.								t for	
1. The corresponde	ence address is No	OT affecte	ed by th	is withd	rawal.				
2. 🛛 Change the corr	respondence addre	ss and di	rect all	future	correspo	ndenc	e to:		* he
	CORRI	ESPONDENC	E ADDRES					_	
Customer Number OR Place Customer Number Bar Code Label here									
☐ Firm or Individual Name	Patent Administrator								
Address	Mems Optical, Inc.								
Address	205 Import Circle, Suite 2								
City	Huntsville	Sta	ate AL		ZI	P	35806		
Country			1		'	TC			
Telephone		Fax	x			280	THE PER		
☐ This request is ma	de on behalf of m	nvself and	d			 	12		
	eys/agents of recongents (with regingents associated to seed in triplicate	_		listed	on the a	MAIL seh		(s),	
This request is enclosed	osed in triplicate	e (includ	any	attachme	nts).	د نه -	-NED		
Name		orter, #:	29,680	P	EC	ENED			
Signature			-			1111-	I. 8 Tons		
Date Ma		ch 11, 200	03		OF	FICE	OF THE SP	MNER	/
NOTE: Withdrawal is effect Unless there are at least response or possible exter	30 days between appr	oval of wit	hdrawal ar	nd the expi	ration dat.	, FLO			